

BHDDH Bulletin

CRAIG S. STENNING
DIRECTOR

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From the Director: The Year in Review

With the new year underway, it is important to acknowledge all of the accomplishments, positive developments and new initiatives resulting from everyone's hard work during 2012. This issue of the BHDDH Bulletin is dedicated to recognizing these achievements that continue to reinforce our commitment to improving the quality of life of those we serve and assuring their access to quality services and supports. Thank you for your continued efforts on behalf of Rhode Islanders with developmental disabilities, substance abuse issues and mental illness as well as individuals with chronic long term medical and psychiatric conditions. I extend my best wishes to all of you for a happy, healthy and prosperous 2013.

BHDDH Deploys RI HOPE Outreach Workers to Rhode Island Communities Most Affected by Hurricane Sandy

RI HOPE (Helping Other People in Emergencies), a time-limited, community-based program originally established to help Rhode Island residents affected by the historic flood in 2010, was reactivated to assist Hurricane Sandy victims with their recovery. The program, which ran through January 13, 2013, was a federal response to the presidential disaster declaration for the most severely-impacted areas of Rhode Island. Program outreach workers visited affected neighborhoods and businesses in Washington County. Through face-to-face outreach in neighborhoods and at community events, RI HOPE staff provided emotional support, education and guidance to those impacted by the hurricane.



Although the federal behavioral health and educational disaster response program has ended, resources for emotional support, education and guidance for any crisis are still available. The Disaster Distress Helpline, is available for immediate assistance and support and confidential crisis counseling, year-round, 24 hours a day, 7 days a week. Anyone seeking emotional help or support can call 1-800-985-5990 or text TalkWithUs to 66746. The RI HOPE website, www.rihope.ri.gov, will continue to serve Rhode Island residents providing information about disaster preparedness, behavioral health responses, and recovery from disasters including pandemic illnesses, man-made disasters (fires, shootings, terrorism, etc.) and weather-related events.

Director Stenning, Along with Education Commissioner Deborah Gist, Offer Aid to Sandy Hook and Local School Systems

The Sandy Hook tragedy had a significant impact on everyone in the country. Unimaginable tragedies like this can cause a range of emotional and physical reactions, even in people who were not directly affected by the event. During emergency situations, the BHDDH Disaster Behavioral Health Response Team (DBHRT) can be activated to collaborate with other community disaster response teams or other Rhode Island departments and provide specific expertise related to the response and recovery of affected individuals. It is important for people to know that their reactions to natural or man-made disasters are normal and expected.

At the time of the Sandy Hook shootings, the DBHRT reached out to the Connecticut community, letting them know that the team could provide support for their disaster response efforts that were already underway. Director Stenning also contacted Commissioner Gist, offering to activate the DBHRT to support Rhode Island's school staff, students and their families during the emotionally difficult time. As a result of their collaboration, a notice was sent to all Rhode Island school administrators offering assistance.

DBHRT offered to supplement the schools' response efforts in a variety of ways. Examples of the types of assistance available include providing access to behavioral health, disaster-specific resources; providing technical assistance for the schools' outreach, education and support processes; conducting in-service training regarding Psychological First Aid and supporting planning efforts for the schools' responses to parents' concerns and reactions.

Eleanor Slater Hospital Receives Another Favorable Review

In December, The Joint Commission visited Eleanor Slater Hospital (ESH) to conduct a four day, physician-led Periodic Performance Review (PPR). The survey involved a comprehensive assessment of the care and treatment of all patients on the Cranston and Zambarano campuses. The surveyor commended the staff for its excellent care and congratulated the leadership for its ability to sustain the impressive standards of care witnessed by the full Joint Commission review team in December of 2011. He also indicated that his visit was a learning experience for him. Although his time as a surveyor with the Joint Commission has brought him to several hospitals in many parts of the country, this was his first visit to a hospital with such a unique patient population and service configuration. Once again ESH received a commendable evaluation from its accreditation body and is proud of the work it does for the citizens of our State.

An independent, not-for-profit organization, The Joint Commission accredits and certifies more than 19,000 health care organizations and programs in the United States. Joint Commission accreditation and certification is recognized nationwide as a symbol of quality that reflects an organization's commitment to meeting certain performance standards.

BHDDH Implements Phase II of Project Sustainability

Phase I of Project Sustainability, an initiative intended to increase transparency and consistency across the system of services available to persons with developmental disabilities, was implemented in 2011. In phase 2, which was implemented this year, BHDDH further defined services, developed rate methodologies for each service, and began to administer the Supports Intensity Scale (SIS) assessment to existing participants in the Developmental Disabilities programs.

SIS is a standardized assessment tool designed by the American Association of Intellectual Disabilities (AAIDD) to measure the pattern and intensity of supports an adult with a developmental disability requires to be successful in a community setting. With participation from providers, advocates, and family members, BHDDH completed a SIS clinical validation study this year. The study was used to update levels of services that are used as a basis for developing individual service packages (ISPs) for providers. Over 1,300 SIS evaluations were completed in 2012.

Participants continue to have the choice to purchase services and the flexibility to use community service packages in order to purchase day program activities, employment-related services or community-based services. In December, notices were sent to participants with anniversary dates in February, March and April, letting them know which SIS Tiers have been assigned to them so that they can develop their annual ISPs. Beginning in January, notices were being sent to other participants, 90 days prior to their anniversary dates, for ISP planning purposes. Currently, BHDDH is in the process of holding community meetings to explain program changes to participants and their families. The next phase of the transformation will focus on employment and housing.

From SAMHSA: Rhode Island's Health Homes Program for Individuals with Mental Illness Should Serve as Model for Other States in the Country

During a recent review of Rhode Island's Health Homes program, the Substance Abuse and Mental Health Services Association (SAMHSA) praised this new program and informed the Centers for Medicare and Medicaid Services (CMS) that Rhode Island's Health Homes for individuals with mental illness should be expanded and used as a model for other states in the country.

The 2011 State plan amendment, approved by CMS, provided BHDDH with enhanced federal funding for the coordination of physical care and behavioral healthcare for individuals who have severe and persistent mental illness (SPMI).

This year, the Department has been working with provider groups, physicians and consumers to develop a state plan amendment and submit it to CMS for the creation of a Health Home model in BHDDH substance abuse treatment programs. The proposed amendment was recommended by SAMHSA. Rhode Island will become the first state in the country to create a Substance Abuse Treatment Health Home model.

Recovery-Oriented System of Care

The Rhode Island Rally4 Recovery, hosted by BHDDH and the Rhode Island Recovery Month Coalition, was selected by Faces & Voices of Recovery as the 2013 National Hub Event for rallies taking place across the country. Over 6,000 people attended the 2012 Rally, celebrating the tenth anniversary of the event which is held to raise awareness about drug and alcohol addiction, mental illness, developmental disabilities and the journey to recovery.



The 2013 Rhode Island Rally will be held on Saturday, September 21. Patrick Kennedy, the Grand Marshall for the 2013, Worldwide Rally for Recovery, will attend.

It will be web streamed live, linking it with other rallies nationwide. Rallies take place in September of each year, throughout the nation, as part of National Recovery Month.